PTO/SB/17 (10-03)

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FEE TRANSMITTAL				Complete if Known					
LEE I KANOM	HIAL		Applic	ation	Numbe	er	09/893,619-Con	f. #4918	
for FY 200	14	L	Filing	Date			June 29, 2001		
		1	First I	Named	Inver	ntor	Amy R. Griffin		
Effective 10/01/2003. Patent fees are subject	to annual revision.		Exam	ner Na	ame		C. A. Fox		
Applicant claims small entity status. S	ee 37 CFR 1.27		Art Ur	iit			3652		
TOTAL AMOUNT OF PAYMENT	\$) 440.00		Attorn	ey Doo	ket No	о.	M4065.0467/P4	67	
METHOD OF PAYMENT (check all	hat apply)				FEE	CALCU	LATION (continued)		
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X Deposit Account:									
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Deposit Account Dickstein Shapiro Morin	&	1051	130	2051	65	Surcharge	- late filing fee or oath	i	
Name Oshinsky LLP		1052	50	2052	25		- late provisional filing	fee or cover	
The Director is authorized to: (check all that apply, X Charge fee(s) indicated below X Credit	any overpayments	1053	130	1053	130	sheet.	sh specification		\vdash
		1812	2,520	1812		_	request for ex parte reexa	mination	
X Charge any additional fee(s) or any underpayme	nt or ree(s)				920*	_	g publication of SIR prio		
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to the above-identified deposit account.		1805	1,840*	1805	1,840*	Examiner	action		
FEE CALCULATION		1251	110	2251	55		for reply within first mon		110.00
1. BASIC FILING FEE		1252	420	2252	210		for reply within second i		
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1001 770 2001 385 Utility filing fee		1255	2,010	2255			for reply within fifth mon	ith	
1002 340 2002 170 Design filing fee		1401	330	2401	165	Notice of A			330.00
1003 530 2003 265 Plant filing fee		1402	330	2402	165	_	ief in support of an appe	al	
1004 770 2004 385 Reissue filing fee		1403	290	2403 1451	145	-	or oral hearing		\vdash
1005 160 2005 80 Provisional filing	ree	1451 1452	1,510 110	2452	55		institute a public use pro revive – unavoidable	oceeding	
SUBTOTAL (1) (\$)	0.00	1453	1,330	2453	665		revive - unintentional		
2. EXTRA CLAIM FEES FOR UTILITY A	ND DEICEUE	1501	1,330	2501	665		e fee (or reissue)		
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Total Claims -** = Claims below	Fee Paid			2502		_			
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1202 18 2202 9 Claims in excess of 20		1809	770	2809	385		bmission after final rejec		
1201 86 2201 43 Independent claims in		1810	770	2810	385		additional invention to be	•	
1203 290 2203 145 Multiple dependent cla						examined	(37CFR 1.129(b))		<u> </u>
1204 86 2204 43 ** Reissue independe over original patent		1801	770	2801	385 900	•	or Continued Examination or expedited examination	. ,	
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SUBMITTED BY							(Complete (if applica	ble))	
	7/-	Regist	ration No	1 -				//	

Name (Print/Type) Thomas J. D'Amico Registration No. (Attorney/Agent) Signature Registration No. (Attorney/Agent) 28,371 Telephone (202) 828-2232 Date August 6, 2004	SUBMITTED BY			 	(Complete	(if applicable))
Signature Date August 6, 2004	Name (Print/Type)	Thomas J. D'Amico		 28,371	Telephone	(202) 828-2232
	Signature		0>		Date	August 6, 2004